

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO	FILING DATE
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			
	IND	DEP	IND	DEP	IND	DEP		
1	1						51	
2		1					52	
3		2					53	
4		2					54	
5		①					55	
6		①					56	
7		1					57	
8		1					58	
9		3					59	
10		①					60	
11	1						61	
12		1					62	
13		1					63	
14		3					64	
15		3					65	
16		1					66	
17		1					67	
18	1						68	
19		1					69	
20		1					70	
21							71	
22							72	
23							73	
24							74	
25							75	
26							76	
27							77	
28							78	
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32							82	
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34							84	
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36							86	
37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	3						TOTAL IND.	
TOTAL DEP.	25						TOTAL DEP.	
TOTAL CLAIMS	28						TOTAL CLAIMS	